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Official Form 1 (4/07)	D00	Junioni	ıα	gc I oi	51			
	States Bankr thern District		ourt				Voluntary	Petition
Name of Debtor (if individual, enter Last, First, <b>Johnson, Nellie May</b>	Middle):		Name	of Joint De	ebtor (Spouse	) (Last, First,	, Middle):	
All Other Names used by the Debtor in the last (include married, maiden, and trade names):	8 years				used by the J maiden, and		in the last 8 years ):	
Last four digits of Soc. Sec./Complete EIN or ot xxx-xx-6336	her Tax ID No. (if more	e than one, state all	Last fo	our digits o	f Soc. Sec./Co	omplete EIN	or other Tax ID No. (i	f more than one, state al
Street Address of Debtor (No. and Street, City, a 44w300 Wheeler Road Sugar Grove, IL	_	ZIP Code	Street	Address of	Joint Debtor	(No. and Str	reet, City, and State):	ZIP Code
County of Residence or of the Principal Place of <b>Kane</b>		60554	Count	y of Reside	ence or of the	Principal Pla	ace of Business:	
Mailing Address of Debtor (if different from stre	eet address):		Mailir	ng Address	of Joint Debt	or (if differen	nt from street address):	
Location of Principal Assets of Business Debtor (if different from street address above):		ZIP Code	1					ZIP Code
Type of Debtor (Form of Organization) (Check one box)  ■ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)	(Check  ☐ Health Care Bus ☐ Single Asset Rein 11 U.S.C. § 1 ☐ Railroad ☐ Stockbroker ☐ Commodity Bro ☐ Clearing Bank ☐ Other ☐ Tax-Exer	al Estate as de 01 (51B)  ker  mpt Entity if applicable) exempt organi f the United S	zation tates	defined "incurr	the I er 7 er 9 er 11 er 12	Cition is Fi	busin	Recognition eding
Filing Fee (Check on  Full Filing Fee attached  Filing Fee to be paid in installments (applicattach signed application for the court's cons is unable to pay fee except in installments. R  Filing Fee waiver requested (applicable to clattach signed application for the court's cons	able to individuals onlideration certifying the lule 1006(b). See Office papter 7 individuals of	at the debtor rial Form 3A.	Check	Debtor is a if: Debtor's a to insiders all applica A plan is Acceptance	a small busin not a small bu aggregate nor s or affiliates) ble boxes: being filed wices of the plai	acontingent li are less than ith this petition were solici	defined in 11 U.S.C. or as defined in 11 U.S. iquidated debts (excluding \$2,190,000.	.C. § 101(51D). ling debts owed
Statistical/Administrative Information  ☐ Debtor estimates that funds will be available  ☐ Debtor estimates that, after any exempt prop there will be no funds available for distribution	erty is excluded and a	administrative					SPACE IS FOR COURT	
Estimated Number of Creditors  1- 50- 100- 200- 49 99 199 999	1000- 5001- 5,000 10,000		25,001- 60,000	100,001- 100,000	OVER 100,000			
Estimated Assets  \$\Begin{array}{ c c c c c c c c c c c c c c c c c c c	\$100,001 to \$1 million	\$1,000, \$100 m			ore than 00 million			
Estimated Liabilities    \$0 to	\$100,001 to \$1 million	\$1,000,			ore than			

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FORM B1 Page

Omciai Form	1 (4/07)		FORM B1, Page 2	
Voluntary	y Petition	Name of Debtor(s):  Johnson, Nellie May		
(This page mu.	st be completed and filed in every case)			
	All Prior Bankruptcy Cases Filed Within Last	8 Years (If more than two, attach ad-	ditional sheet)	
Location Where Filed:	- None -	Case Number:	Date Filed:	
Location Where Filed:		Case Number:	Date Filed:	
Pei	nding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more than	one, attach additional sheet)	
Name of Debto	or:	Case Number:	Date Filed:	
District:		Relationship:	Judge:	
	Exhibit A	Ex	hibit B	
forms 10K at pursuant to S	leted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission section 13 or 15(d) of the Securities Exchange Act of 1934 ting relief under chapter 11.)	(To be completed if debtor is an individual whose debts are primarily consumer debts.)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).		
☐ Exhibit A	A is attached and made a part of this petition.	X /s/ David Chang	June 25, 2007	
		Signature of Attorney for Debtor(s)  David Chang 6273793	(Date)	
	Exh	ibit C		
l _	r own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.	pose a threat of imminent and identifiable	harm to public health or safety?	
Exhibit If this is a join	eted by every individual debtor. If a joint petition is filed, ear D completed and signed by the debtor is attached and made	a part of this petition.	separate Exhibit D.)	
	Information Regardin	g the Debtor - Venue		
	(Check any ap	_		
-	Debtor has been domiciled or has had a residence, principal days immediately preceding the date of this petition or for	al place of business, or principal asset	s in this District for 180 any other District.	
	There is a bankruptcy case concerning debtor's affiliate, ge	eneral partner, or partnership pending	in this District.	
	Debtor is a debtor in a foreign proceeding and has its princ this District, or has no principal place of business or assets proceeding [in a federal or state court] in this District, or the sought in this District.	in the United States but is a defendar ne interests of the parties will be serve	nt in an action or d in regard to the relief	
	Statement by a Debtor Who Resides (Check all app		7	
	Landlord has a judgment against the debtor for possession		complete the following.)	
	(Name of landlord that obtained judgment)			
	(Address of landlord)			
	Debtor claims that under applicable nonbankruptcy law, the permitted to cure the entire monetary default that gave rise possession was entered, and			
	Debtor has included in this petition the deposit with the coafter the filing of the petition.	urt of any rent that would become due	e during the 30-day period	

### Voluntary Petition

(This page must be completed and filed in every case)

#### 301113011

Signatures

Name of Debtor(s):

Johnson, Nellie May

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

#### X /s/ Nellie May Johnson

Signature of Debtor Nellie May Johnson

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

June 25, 2007

Date

#### Signature of Attorney

#### X /s/ David Chang

Signature of Attorney for Debtor(s)

#### David Chang 6273793

Printed Name of Attorney for Debtor(s)

#### Law Office of David Chang

Firm Name

10 N. Martingale Rd. #400

Schaumburg, IL 60173

Address

### 847.466.1337 Fax: 847.466.1896

Telephone Number

June 25, 2007

Date

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

#### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

Date

provided above.

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the

bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

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Official Form 1, Exhibit D (10/06)

### **United States Bankruptcy Court Northern District of Illinois**

In re	Nellie May Johnson		Case No.	
		Debtor(s)	Chapter	7

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.] \_\_\_\_

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

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### Official Form 1, Exh. D (10/06) - Cont.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or
through the Internet.);
☐ Active military duty in a military combat zone.
□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling
requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor:		/s/ Nellie May Johnson
	_	Nellie May Johnson
Date:	June 25, 2007	

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Form 6-Summary (10/06)

# **United States Bankruptcy Court Northern District of Illinois**

In re	Nellie May Johnson		Case No		
-		Debtor	,		
			Chapter	7	
			•		

### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	14,900.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	2		83,315.48	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		8.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	15		47,529.25	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	3			5,769.06
J - Current Expenditures of Individual Debtor(s)	Yes	3			5,999.90
Total Number of Sheets of ALL Schedu	ıles	32			
	T	otal Assets	14,900.00		
			Total Liabilities	130,852.73	

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Official Form 6 - Statistical Summary (10/06)

# **United States Bankruptcy Court Northern District of Illinois**

In re	Nellie May Johnson		Case No.	
_		Debtor ,		
			Chapter	7

### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) (whether disputed or undisputed)	8.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	8.00

#### State the following:

Average Income (from Schedule I, Line 16)	5,769.06
Average Expenses (from Schedule J, Line 18)	5,999.90
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	6,852.33

#### State the following:

		-
Total from Schedule D, "UNSECURED PORTION, IF ANY" column		8,249.48
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	8.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		47,529.25
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		55,778.73

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Form B6A (10/05)

In re	Nellie May Johnson	Case No.	
_		Debtor	

### SCHEDULE A. REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Wife, Joint, or Community

Nature of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00** 

(Report also on Summary of Schedules)

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Form B6B (10/05)

In re	Nellie May Johnson	Case No.	
_		Debtor	

### SCHEDULE B. PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

	Type of Property	N O Description an E	d Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	x			
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Checking account with Na	tional City	•	100.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	x			
4.	Household goods and furnishings, including audio, video, and	Miscellaneous used house	ehold goods	-	1,000.00
	computer equipment.	Living Room set - lien held	d by aronson furniture	-	400.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	х			
ó.	Wearing apparel.	Used clothing		-	400.00
7.	Furs and jewelry.	x			
3.	Firearms and sports, photographic, and other hobby equipment.	x			
).	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	Whole life policy through beneficiaries are daughter cash value	Bankers Insurance - 's - just started no curren	- t	0.00
10.	Annuities. Itemize and name each issuer.	x			
			(Total	Sub-Tota of this page)	al > 1,900.00

**2** continuation sheets attached to the Schedule of Personal Property

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Form B6B (10/05)

In re	Nellie May Johnson	Case No	
-		,	
		Debtor	

### SCHEDULE B. PERSONAL PROPERTY

			(Continuation Sheet)		
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)).	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	x			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	x			
				Sub-Tota	al > <b>0.00</b>
				(Total of this page)	

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

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Form B6B (10/05)

In re	Nellie May Johnson	Case No.

Debtor

### SCHEDULE B. PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	200	04 Chevy s-10 with approximately 60k miles	-	13,000.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > (Total of this page)

13,000.00

Total >

14,900.00

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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Form B6C (4/07)

In re	Nellie May Johnson	Case No.
-	<u> </u>	Debtor

### SCHEDULE C. PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$136,875.
☐ 11 U.S.C. §522(b)(2)	
■ 11 U.S.C. §522(b)(3)	

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Checking, Savings, or Other Financial Accounts, C	ertificates of Deposit		
Checking account with National City	735 ILCS 5/12-1001(b)	100.00	100.00
Household Goods and Furnishings Miscellaneous used household goods	735 ILCS 5/12-1001(b)	1,000.00	1,000.00
Wearing Apparel Used clothing	735 ILCS 5/12-1001(a)	400.00	400.00
Interests in Insurance Policies Whole life policy through Bankers Insurance - beneficiaries are daughters - just started no current cash value	215 ILCS 5/238	0.00	0.00
Automobiles, Trucks, Trailers, and Other Vehicles 2004 Chevy s-10 with approximately 60k miles	735 ILCS 5/12-1001(c)	2,400.00	13,000.00

Total: 3,900.00 14,500.00

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Official Form 6D (10/06)

In re	Nellie May Johnson	Case No.	
-	<del>-</del>	Debtor	

### SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	E E	) [	NATURE OF LIEN, AND DESCRIPTION AND VALUE	CONTINGEN	UNLIQUIDAT	SPUTE	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. pxxxxxx6510  Aronson Furniture Company c/o Monterey Financial Services Carlsbad, CA 92018	)	<b>‹</b>  -	05 Purchase Money Security Living Room set - lien held by aronson furniture  Value \$ 400.00		T E D		4-00 40	4 000 40
Account No. xxxxxxx5536  Consumer Portfolio Svc Po Box 57071 Irvine, CA 92619		-	Opened 1/27/07 Last Active 4/30/07 Purchase Money Security 2004 Chevy s-10 with approximately 60k miles  Value \$ 13,000.00				1,793.48	1,393.48
Account No. xxxxxxx6971  Nuvell Financial 17500 Chenal Pkwy Ste 20 Little Rock, AR 72223	,	<b>(</b> -	Opened 1/30/07 Last Active 4/30/07 Purchase Money Security Automobile - Debtor is not on title to the property she is merely a co-signor on the loan. The payments on this vehicle are made by her daughter.  Value \$ Unknown				17,603.00	Unknown
Account No. xxxxxxxxxxxxxx0001  Roadloans.com 7711 Center Ave Ste 100 Huntington Beach, CA 92647	,	<b>(</b> -	Opened 12/15/06 Last Active 4/13/07 Purchase Money Security Automobile - Debtor is not on title to the property, but merely a co-signor on the loan. The payments on the loan are made by Jay Neace.  Value \$ Unknown				24,510.00	Unknown
continuation sheets attached				Subt		-	63,762.48	8,249.48

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Official Form 6D (10/06) - Cont.

In re	Nellie May Johnson	Case No.
		Debtor ,

### SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

	_			_		_		
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	L H H	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	LIQUIDA	U T E	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxxxxxxxxxx0001			Opened 1/27/07 Last Active 3/13/07	Ϊ	T E D			
	1		Purchase Money Security		D	Н		
Wells Fargo Po Box 29704 Phoenix, AZ 85038	х	-	Automobile - debtor is not on title to the property, but merely a co-signor on the loan. The payments on this vehicle are made by her son-in-law.					
			Value \$ Unknown			Ц	19,553.00	Unknown
Account No.								
			Value \$					
Account No.	┢	t	value \$	H	$\vdash$	Н		
			Value \$	-				
Account No.	┢	H	value \$	$\vdash$		Н		
Account No.			Value \$					
Account No.								
			Value \$					
	<u>.                                    </u>	_		Subi	Lote	뉘		
Sheet <u>1</u> of <u>1</u> continuation sheets attac Schedule of Creditors Holding Secured Claims		d to	Total of t				19,553.00	0.00
2	•		(Report on Summary of So	Т	ota	ıl	83,315.48	8,249.48
			, .r					

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Official Form 6E (4/07)

In re	Nellie May Johnson		Case No.	
_		Debtor	_,	

### SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filling of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.  The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m).  If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Total" on the last sheet of the completed schedule. Report this total also on the Statistical Summary of Schedules.  Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box lab
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
□ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trust or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered provided. 11 U.S.C. § 507(a)(7).
■ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance, 11 U.S.C. 8 507(a)(10)

1 continuation sheets attached

<sup>\*</sup> Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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Official Form 6E (4/07) - Cont.

In re	Nellie May Johnson	Case No
_	-	Debtor

### SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, NL I QU I DATED ONTINGENT SPUTED AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED AMOUNT INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM C AMOUNT ENTITLED TO PRIORITY AND ACCOUNT NUMBER (See instructions.) Account No. xxx-xx-6336 06 Internal Revenue Service 0.00 8.00 8.00 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 8.00 8.00 Total 0.00 (Report on Summary of Schedules) 8.00 8.00

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Official Form 6F (10/06)

In re	Nellie May Johnson		Case No.	
-	·	Debtor	-,	

### SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

Check this box is debtor has no creditors nothing unsecutor	Ju C	14111	is to report on this benedule 1.					
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	I N G	Z L L Q D L	DISPUTED		AMOUNT OF CLAIM
Account No. xxxx6430			Opened 7/23/04 Last Active 8/01/05	Ţ	D A T E		Ī	
Aarow Financial Services 5996 W Touhy Ave Niles, IL 60714		_	Collection A.F.S. Assignee Of Oklahoma G		D			524.00
Account No. xxxxxx9835			Opened 8/08/01	$\top$			1	
Anderson Fin Network Po Box 3097 Bloomington, IL 61702		-	Collection Dish Network					166.00
Account No. Fxxxxx3330			06	$\perp$	L		+	100.00
Associated Radiologists of Jol 39069 Treasury Center Chicago, IL 60694		_	medical bills					
								471.00
Account No. johne000  Bakul K. Pandya 75 129th Infantry Dr Joliet, IL 60435		_	06 medical bills					675.00
	<u> </u>			Subt	tota	<u>L</u>	+	
			(Total of				,	1,836.00

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Official Form 6F (10/06) - Cont.

In re	Nellie May Johnson	Case No	_
_		Debtor	

T.	c L	usband, Wife, Joint, or Community	16	Τυ	D	1
(See instructions above.)	CODEBTOR	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGEN	LQU	I S P U T	AMOUNT OF CLAIM
Account No. xxsck5830		05	T	E		
blatt, hasenmiller, lebsker & moore 125 s. Wacker Dr #400 Chicago, IL 60606-4440		notice only		D		0.00
Account No. xxxxxxxxxxxx6000	+	Opened 1/01/06 Last Active 11/01/06		_	<u> </u>	0.00
Cb Accts Inc 1101 Main St Suite Peoria, IL 61606		Med1 02 Valley West Comm Hospital				
						5,928.00
Account No. xxxxxxxxxxxxx0000  Cb Accts Inc 1101 Main St Suite Peoria, IL 61606	-	Opened 7/01/05 Last Active 11/01/06 Med1 02 Valley West Comm Hospital				5,586.00
Account No. xxxxxxxxxxxx9569  Cbs Col Owbr Pob 1430 Owensboro, KY 42302		Opened 10/01/02 Last Active 12/01/02 Med1 Caverna Memorial Hospital				
						423.00
Account No. xxx0199  Cda/pontiac 415 E Main Pob 213 Streator, IL 61364		Opened 1/01/04 Last Active 3/01/04 Med1 Bhalla M D Suresh				875.00
Sheet no1 of _14 _ sheets attached to Schedule of		1	Sub	tots	1 a1	
Creditors Holding Unsecured Nonpriority Claims		(Total c				12,812.00

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Official Form 6F (10/06) - Cont.

In re	Nellie May Johnson	Case No.	
_		Debtor	

CDEDITODIS NAME	C Husband, Wife, Joint, or Community				U	D	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	DALIQUIDATED	I S P	AMOUNT OF CLAIM
Account No. xxx0956			Opened 11/01/05 Last Active 12/01/05	Т	T		
Cda/pontiac 415 E Main Pob 213 Streator, IL 61364		-	Collection Med1 02 Valley West Medical Center		D		695.00
Account No. xxx8995	+		Opened 9/01/05 Last Active 11/01/05 Collection Med1 02 Yatin M Shah Mdsc				093.00
Cda/pontiac 415 E Main Pob 213 Streator, IL 61364		-	Primary C				
							545.00
Account No. xxx1351  Cda/pontiac 415 E Main Pob 213 Streator, IL 61364		-	Opened 4/01/05 Last Active 6/01/05 Little Rock Fox Fire District				
							498.00
Account No. xxx8564  Cda/pontiac 415 E Main Pob 213  Streator, IL 61364		-	Opened 8/01/06 Last Active 10/01/06 Collection Med1 02 Yatin M Shah Mdsc Primary C				
							490.00
Account No. xxx7419  Cda/pontiac 415 E Main Pob 213 Streator, IL 61364		_	Opened 8/01/06 Last Active 10/01/06 Collection Med1 02 Cardiology Assoc Of Northrn				
							300.00
Sheet no. <b>2</b> of <b>14</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			S (Total of t		tota		2,528.00

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Official Form 6F (10/06) - Cont.

In re	Nellie May Johnson	Case No	
_		Debtor	

	16	L	should Wife Island on Occupanying	<del></del>		I 5	<u> </u>
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COXHLXGEXH	UNLIQUIDATED	SPUTED	AMOUNT OF CLAIM
Account No. xxx2809			Opened 5/01/06 Last Active 7/01/06	٦т	E		
Cda/pontiac 415 E Main Pob 213 Streator, IL 61364		-	Collection Med1 02 Digestive Health Associates		D		274.00
Account No. xxx2946	┝		Opened 5/01/06 Last Active 7/01/06	+	$\vdash$	┝	
Cda/pontiac 415 E Main Pob 213 Streator, IL 61364		-	Collection Med1 02 Yatin M Shah Mdsc Primary C				260.00
Account No. xxx6403			Out and 1 4/04/04   1 - 1/4 A 1/2   0/04/04	+			200.00
Cda/pontiac 415 E Main Pob 213 Streator, IL 61364		-	Opened 1/01/04 Last Active 3/01/04 Med1 Pankaj M D F A A O S Ram S				145.00
Account No. xxx3054	H		Opened 3/01/04 Last Active 5/01/04	+			
Cda/pontiac 415 E Main Pob 213 Streator, IL 61364		-	Med1 Primary Care Joliet				140.00
Account No. xxx5239	$\vdash$		Opened 2/01/04 Last Active 4/01/04	+		$\vdash$	
Cda/pontiac 415 E Main Pob 213 Streator, IL 61364		_	Med1 Primary Care Joliet				100.00
Sheet no. <b>3</b> of <b>14</b> sheets attached to Schedule of	•			Subt	tota	ıl	040.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	919.00

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Official Form 6F (10/06) - Cont.

In re	Nellie May Johnson		Case No.	
		Debtor	,	

CREDITOR'S NAME,	Ç	Нι	usband, Wife, Joint, or Community	Ğ	Ü	Į.	)	
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODE BT OR	C A M	CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGENT		D I S P UT E D		AMOUNT OF CLAIM
Account No. xxx1873			Opened 8/01/03 Last Active 10/01/03	٦⊤	T E D		ſ	
Cda/pontiac 415 E Main Pob 213 Streator, IL 61364		-	Med1 Primary Care Joliet		D			95.00
Account No. 6336			07				T	
Check n' go 2116 W. Jefferson St Joliet, IL 60435-6622		-	payday loan					200.00
								900.00
Account No. xxxxxx6051  Com Ed Bill Payment Center Chicago, IL 60668-0001		-	05 utility					1,432.25
Account No. 6336			06			T	7	
Community Orthopedics 1240 Essington Rd. #200 Joliet, IL 60435		-	medical bills					343.00
Account No. xxxxx503.1			07		T	T	†	
Consultants in Diagnostic Imaging, P.O. Box 865 Dekalb, IL 60115		_	medical services					78.00
Sheet no. 4 of 14 sheets attached to Schedule of				Sub	tota	ıl	T	2 0 4 0 0 5
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pas	œ)	١	2,848.25

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Official Form 6F (10/06) - Cont.

In re	Nellie May Johnson	Case No	
_		Debtor	

	С	Ни	sband, Wife, Joint, or Community	I c	U	Ь	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	NL - QU - DATED	I S P U T E D	AMOUNT OF CLAIM
Account No. xxxxx7114			Opened 2/01/03 Last Active 3/01/03	٦	T E		
Crd Prt Asso 13355 Noel Road# Dallas, TX 75240		-	At T Broadband		D		247.00
Account No. xxx7981	╁		Opened 10/02/06 Last Active 2/01/07				247.00
Creditors Collection B 755 Almar Pkwy Bourbonnais, IL 60914	1	_	Collection Associated Radiologists Of Jol				471.00
Account No. xxx7325			Opened 10/02/06 Last Active 2/01/07				
Creditors Collection B 755 Almar Pkwy Bourbonnais, IL 60914	-	-	Collection Associated Radiologists Of Jol				300.00
Account No. xxx7046	╁		Opened 6/01/04 Last Active 10/01/04				
Credtrs Coll Pob 63 151 N Schuyler Ave Kankakee, IL 60901		-	Med1 02 Associated Radiologists				259.00
Account No. <b>xx7956</b>	f		Opened 11/01/02 Last Active 7/01/04	+		$\vdash$	
Credtrs Coll Pob 63 151 N Schuyler Ave Kankakee, IL 60901		_	Med1 02 Med3000 Center For Surgery				252.00
Sheet no5 _ of _14 _ sheets attached to Schedule of				Sub			1,529.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	1,323.00

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In re	Nellie May Johnson	Case No.	
_		Debtor	

	С	Hu	sband, Wife, Joint, or Community	С	U	Ь	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLIQUIDAT	T T	AMOUNT OF CLAIM
Account No. xx7958			Opened 2/01/03 Last Active 7/01/04	Т	T E D		
Credtrs Coll Pob 63 151 N Schuyler Ave Kankakee, IL 60901		_	Med1 02 Associated Radiologists				040.00
Account No. xx7959			Opened 2/01/03 Last Active 7/01/04		F		213.00
Credtrs Coll Pob 63 151 N Schuyler Ave Kankakee, IL 60901		_	Med1 02 Associated Radiologists				
							195.00
Account No. xxx7044  Credtrs Coll Pob 63 151 N Schuyler Ave Kankakee, IL 60901		-	Opened 6/01/04 Last Active 10/01/04 Med1 02 Associated Radiologists				177.00
Account No. xxx7047			Opened 6/01/04 Last Active 10/01/04				177.00
Credtrs Coll Pob 63 151 N Schuyler Ave Kankakee, IL 60901		-	Med1 02 Associated Radiologists				169.00
Account No. xx7964			Opened 2/01/03 Last Active 7/01/04				103.00
Credtrs Coll Pob 63 151 N Schuyler Ave Kankakee, IL 60901		-	Med1 02 Associated Radiologists				
							153.00
Sheet no. <u>6</u> of <u>14</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub this			907.00

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Official Form 6F (10/06) - Cont.

In re	Nellie May Johnson	Case No	
'-		Debtor	

	С	Hu	sband, Wife, Joint, or Community	Тс	U	Ь	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTLNGEN	NLIQUIDAT	DISPUTED	AMOUNT OF CLAIM
Account No. xx7965			Opened 1/01/04 Last Active 7/01/04		ΙE		
Credtrs Coll Pob 63 151 N Schuyler Ave Kankakee, IL 60901		_	Med1 02 Associated Radiologists		D		420.00
Account No. xx7963			Opened 2/01/03 Last Active 7/01/04	+	<u> </u>		138.00
Credtrs Coll Pob 63 151 N Schuyler Ave Kankakee, IL 60901		_	Med1 02 Associated Radiologists				
							138.00
Account No. xx7957  Credtrs Coll Pob 63 151 N Schuyler Ave Kankakee, IL 60901		-	Opened 2/01/03 Last Active 7/01/04 Med1 02 Associated Radiologists				120.00
Account No. xx7952			Opened 9/01/02 Last Active 7/01/04	+			
Credtrs Coll Pob 63 151 N Schuyler Ave Kankakee, IL 60901		_	Med1 02 Associated Radiologists				117.00
Account No. xxxxxxxx2948			Opened 3/29/03 Last Active 5/01/07	+		$\vdash$	
Dependon Collection Se 7627 W Lake St 210 River Forest, IL 60305		-	Collection Pathology Laboratory Consult				
				$\perp$			300.00
Sheet no. <u>7</u> of <u>14</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub this			813.00

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In re	Nellie May Johnson	Case No	
_		Debtor	

	C	н	sband, Wife, Joint, or Community	С	111	D	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J C H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONFINGEN		S P	AMOUNT OF CLAIM
Account No. xxxxxxxx8271			Opened 10/07/02 Last Active 5/01/07	Т	T E		
Dependon Collection Se 7627 W Lake St 210 River Forest, IL 60305		-	Collection Pathology Laboratory Consult				257.00
Account No. xxxxxxx7293	╀		Opened 5/04/06 Last Active 5/01/07	_	┡		257.00
Dependon Collection Se 7627 W Lake St 210 River Forest, IL 60305		-	Collection Pathology Laboratory Consult				125.00
Account No. xxxxxxxx0781	╁		Opened 4/23/04 Last Active 5/01/07	+			.20.00
Dependon Collection Se 7627 W Lake St 210 River Forest, IL 60305		-	Collection Pathology Laboratory Consult				110.00
Account No. xxxxxxxx5917	╁		Opened 8/28/06 Last Active 5/01/07				
Dependon Collection Se 7627 W Lake St 210 River Forest, IL 60305		-	Collection Pathology Laboratory Consult				96.00
Account No. xxxxxxxx2629	╁		Opened 8/29/05 Last Active 5/01/07	+	H		
Dependon Collection Se 7627 W Lake St 210 River Forest, IL 60305		-	Collection Pathology Laboratory Consult				95.00
Sheet no. <b>8</b> of <b>14</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub			683.00

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Official Form 6F (10/06) - Cont.

In re	Nellie May Johnson	Case No	
_		Debtor	

CREDITOR'S NAME,	Ç	Hu	sband, Wife, Joint, or Community	С	Ü	D	
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONTINGEN	10	SPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxx7646			Opened 4/25/03 Last Active 5/01/07	Ţ̈	T E D		
Dependon Collection Se 7627 W Lake St 210 River Forest, IL 60305		-	Collection Pathology Laboratory Consult		D		72.00
Account No. xx8297			Opened 3/10/05 Last Active 4/01/05 Collection Southwest Surgical Associates				72.00
Falls Collection Svc Po Box 668 Germantown, WI 53022		-					202.00
Account No. xxxxxxxx3663	+		Opened 12/01/05 Last Active 5/01/07	+			302.00
Fst Premier 900 W Delaware Po Box 5114 Sioux Falls, SD 57117		-	CreditCard				367.00
Account No. xxx x1260	╁		07	+	-		
Great Lakes Specialty Finance, Inc 2116 W. Jefferson Street Joliet, IL 60435		-	payday loan				
Account No. johne000	4		06				1,000.00
Hari P. Gadde md 330 N. Madison, l11 Joliet, IL 60435		-	medical services				200.00
							360.00
Sheet no. <u>9</u> of <u>14</u> sheets attached to Schedule o Creditors Holding Unsecured Nonpriority Claims	f		(Total of	Sub			2,101.00

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Official Form 6F (10/06) - Cont.

In re	Nellie May Johnson		Case No.	
-		Debtor		

CDEDITODIS NAME	С	Hu	sband, Wife, Joint, or Community	Ç	U	D	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.		N L I QU I D	I S P U T E D	AMOUNT OF CLAIM
Account No. xx7775			06	٦	T		
Heartland Cardivascular Center, LLC 210 N. hammes #205 Joliet, IL 60435-8139		-	medical bills		D		
Account No. xxxxxx5499			Opened 6/01/05 Last Active 5/01/07	+			300.00
Midland Cred 8875 Aero Dr Suite 200 San Diego, CA 92123		-	FactoringCompanyAccount Aspire Visa				
							1,121.00
Account No. xxxxxxxxxxxx0666  Mpcs 5055 Newburgh Plaza Sout Newburgh, IN 47630		-	Opened 11/17/04 Last Active 5/01/07 Collection Aishling Obstetrics Gynecol				213.00
Account No. xxxx5801  Nco- Medclr Pob 41448 Philadelphia, PA 19101		_	Opened 7/01/06 Last Active 5/01/07 Med1 02 Fischer Mangold Joliet				646.00
Account No. xxxx3912  Nco- Medclr Pob 41448 Philadelphia, PA 19101		-	Opened 2/23/05 Last Active 5/01/07 FactoringCompanyAccount Med1 02 Fischer Mangold Joliet				646.00
							586.00
Sheet no. <u>10</u> of <u>14</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub			2,866.00

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Official Form 6F (10/06) - Cont.

In re	Nellie May Johnson		Case No.	
•		Debtor	,	

	Ic	ш	sband, Wife, Joint, or Community	Tc	Ιυ	Ιn	<u> </u>
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COZHLZGEZH	DALIQUIDATED	SPUTED	AMOUNT OF CLAIM
Account No. xxxx9008			Opened 3/25/04 Last Active 5/01/07	]⊤	E		
Nco- Medclr Pob 41448 Philadelphia, PA 19101		-	FactoringCompanyAccount Med1 02 Fischer Mangold Joliet		D		563.00
Account No. xxxx9009  Nco- Medclr Pob 41448 Philadelphia, PA 19101		-	Opened 3/25/04 Last Active 5/01/07 FactoringCompanyAccount Med1 02 Fischer Mangold Joliet				
							387.00
Account No. xxxx9007  Nco- Medclr Pob 41448 Philadelphia, PA 19101		-	Opened 3/25/04 Last Active 5/01/07 FactoringCompanyAccount Med1 02 Fischer Mangold Joliet				263.00
Account No. xxxx3125	t		notice only	+			
OMS P.O. Box 18060 Hauppauge, NY 11788-8860		-					0.00
Account No. xxx9481	f	$\vdash$	Opened 4/01/03 Last Active 3/01/05	+	$\vdash$	+	
Osi Collect 1375 E Woodfield #110 Schaumburg, IL 60173		-	Collection Med1 02 Silver Cross Hospital				1,841.00
Sheet no. 11 of 14 sheets attached to Schedule of	_			Sub	tota	al	0.054.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	3,054.00

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Official Form 6F (10/06) - Cont.

In re	Nellie May Johnson	Case No	
_		Debtor	

	С	Hu	sband, Wife, Joint, or Community	Тс	υ	D	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	NL QU L DAT	I S P U T E D	AMOUNT OF CLAIM
Account No. xxx7020			Opened 10/01/02 Last Active 3/01/05		T E D		
Osi Collect 1375 E Woodfield #110 Schaumburg, IL 60173		-	Collection Med1 02 Silver Cross Hospital		D		562.00
Account No. xxx5884	-		Opened 11/01/02 Last Active 3/01/05	+			302.00
Osi Collect 1375 E Woodfield #110 Schaumburg, IL 60173		_	Collection Med1 02 Silver Cross Hospital				445.00
Account No. xxx5885	_		Opened 11/01/02 Last Active 3/01/05	oppi			445.00
Osi Collect 1375 E Woodfield #110 Schaumburg, IL 60173		-	Collection Med1 02 Silver Cross Hospital				339.00
Account No. xxx8964	t		Opened 10/10/06 Last Active 12/01/06	+			
Osi Collection Service 1375 E Woodfield Rd Ste Schaumburg, IL 60173		-	Collection Silver Cross Hospital				7,343.00
Account No. xxx0901	$\vdash$		Opened 6/07/02 Last Active 5/01/07	+	$\vdash$	$\frac{1}{1}$	, , ,
Osi Collection Service 1375 E Woodfield Rd Ste Schaumburg, IL 60173		-	Collection Silver Cross Hospital				443.00
Sheet no. 12 of 14 sheets attached to Schedule of	_		·	Sub	tota	ıl	0.400.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	9,132.00

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Official Form 6F (10/06) - Cont.

In re	Nellie May Johnson	Case No.	
_		Debtor	

	С	Ни	sband, Wife, Joint, or Community	Tc	Τυ	Гр	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONFLEGEN	UNLIQUIDAT	T F	AMOUNT OF CLAIM
Account No. Dxxxx220N1	Γ		Opened 10/02/06		ΙE		
Oxford Collection Serv 135 Maxess Rd Ste 2a Melville, NY 11747		-	Collection Penn Foster Education Direct		D		492.00
Account No. vxxx1487	_		06	+	<u> </u>		492.00
pellettieri and Associates 991 Oak creek drive Lombard, IL 60148-6408		-	notice only				
							0.00
Account No. vxx2263  Provena Health 2870 Stoner Court #300 North Liberty, IA 52317	-	-	07 medical services				137.00
Account No. x7409			06	$\dagger$			
RRCA 312 Locust Sterling, IL 61081		-	notice only - collection for sandwich family practice				0.00
Account No. fxxxx6330	$\vdash$		06	+	$\vdash$	$\vdash$	3.50
Silver Cross Hospital 1200 Maple Road Joliet, IL 60432	-	-	medical bills				0.00
Sheet no. 13 of 14 sheets attached to Schedule of		_	<u> </u>	Sub	tota	<u> </u>	
Creditors Holding Unsecured Nonpriority Claims			(Total of				629.00

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Official Form 6F (10/06) - Cont.

In re	Nellie May Johnson	Case No	
_	·	Debtor	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	ļç	Ü	P	
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	NL QU L DA	DISPUTED	AMOUNT OF CLAIM
Account No. 5512			Opened 3/23/01	T	T		
Taylor Auto Sales Inc 1008 Happy Valley Rd Glasgow, KY 42141		-	Automobile		E D		1,940.00
Account No. 185	╁	╁	Opened 10/10/05	+	┢	H	
Usa Payday Loans 111 W Veterans Parkway Yorkville, IL 60560		-	InstallmentLoan				
							725.00
Account No. dxxxx3277  Valley West Community Hospital P.O. Box 739		-	07 medical services				
Moline, IL 61266-0739							
							1,947.00
Account No. xxxx1A101	4		06 medical services				
Votin Chah MD			medical services				
Yatin Shah, MD 34609 Eagle Way		-					
Chicago, IL 60678-1346							
							260.00
Account No.				Ī			
Sheet no. 14 of 14 sheets attached to Schedule of	-	_	1	Sub	tota	ıl	
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	4,872.00
					ota		47.500.05
			(Report on Summary of S	chec	lule	es)	47,529.25

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Form B6G (10/05)

In re	Nellie May Johnson		Case No.	
		Debtor	,	

### SCHEDULE G. EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 07-11287 Doc 1 Filed 06/25/07 Entered 06/25/07 10:33:42 Desc Main Document Page 33 of 57

Form B6H (10/05)

In re	Nellie May Johnson	Case No.	
		Debtor	

### SCHEDULE H. CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

NAM	E AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
	Neace e as listed	Nuvell Financial 17500 Chenal Pkwy Ste 20 Little Rock, AR 72223
	Neace e as listed	Roadloans.com 7711 Center Ave Ste 100 Huntington Beach, CA 92647
	Neace e as listed	Wells Fargo Po Box 29704 Phoenix, AZ 85038
	Neace e as listed	Aronson Furniture Company c/o Monterey Financial Services Carlsbad, CA 92018

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Official Form 6I (10/06)

In re	Nellie May Johnson		Case No.	
		Debtor(s)		

### SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child

Debtor's Marital Status:	parated and a joint petition is not filed. Do not state the name of any DEPENDENTS OF DEBT				
Single	RELATIONSHIP(S):  Brother  Disabled Friend  Mother	AGE(S): 41 48 68			
Employment:*	DEBTOR		SPOUSE		
Occupation	Personal Assitant/Caregiver				
Name of Employer	State Of Illinois				
How long employed	5 years				
Address of Employer	44W300 Wheeler Rd Sugar Grove, IL 60554				
*See Attachment for Addi	itional Employment Information				
	erage or projected monthly income at time case filed)		DEBTOR		SPOUSE
1. Monthly gross wages, sal	lary, and commissions (Prorate if not paid monthly)	\$_	3,290.00	\$_	N/A
2. Estimate monthly overtin	ne	\$	0.00	\$	N/A
3. SUBTOTAL		\$_	3,290.00	\$_	N/A
4. LESS PAYROLL DEDU					
a. Payroll taxes and so	ocial security	\$_	829.28	\$_	N/A
b. Insurance		\$_	0.00	\$_	N/A
c. Union dues		\$_	75.66	\$_	N/A
d. Other (Specify):		\$_	0.00	\$_	N/A
		\$_	0.00	\$_	N/A
5. SUBTOTAL OF PAYRO	OLL DEDUCTIONS	\$_	904.94	\$_	N/A
6. TOTAL NET MONTHL	Y TAKE HOME PAY	\$_	2,385.06	\$_	N/A
	eration of business or profession or farm (Attach detailed statemen	_	0.00	\$_	N/A
8. Income from real propert	ty	\$_	0.00	\$_	N/A
9. Interest and dividends		\$ _	0.00	\$ _	N/A
10. Alimony, maintenance of that of dependents liste	or support payments payable to the debtor for the debtor's used above	e or \$	0.00	\$	N/A
11. Social security or gover		· <del>-</del>		_	
(Specify):		\$	0.00	\$	N/A
		\$	0.00	\$	N/A
12. Pension or retirement in	ncome	\$	0.00	\$	N/A
13. Other monthly income (Specify): See Deta	iled Income Attachment	\$_	3,384.00	\$_	N/A
14. SUBTOTAL OF LINES	S 7 THROUGH 13	\$_	3,384.00	\$_	N/A
15. AVERAGE MONTHLY	Y INCOME (Add amounts shown on lines 6 and 14)	\$_	5,769.06	\$_	N/A
	GE MONTHLY INCOME: (Combine column totals ne debtor repeat total reported on line 15)		\$	5,769	9.06

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

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Official Form 6I (10/06)

In re	Nellie May Johnson		Case No.	
		Debtor(s)		

# SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S) Detailed Income Attachment

### **Other Monthly Income:**

Home Instead Job	\$	1,500.00	\$ N/A
Jay Neace - social security	<u> </u>	623.00	\$ N/A
David Cahoe - social security	<u> </u>	623.00	\$ N/A
Louise Hope - social security	<u> </u>	409.00	\$ N/A
Louise Hope - widow benefits	\$	229.00	\$ N/A
Total Other Monthly Income	\$	3,384.00	\$ N/A

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		Document	Page 36 of 57	

Official Form 6I (10/06)

In re	Nellie May Johnson		Case No.	-
		Debtor(s)		

### SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

### Attachment for Additional Employment Information

Debtor		
Occupation	Care giver	
Name of Employer	Home Instead Senior Care	
How long employed	3 months	
Address of Employer	500 East Ogden Ave #204	
	Naperville, IL 60563	

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Official Form 6J (10/06)

In re	Nellie May Johnson		Case No.	
		Debtor(s)		

## SCHEDULE J. CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

SCHEDULE S. COMMENT EMENTIONES OF INDIVIDUAL	DLDI	
Complete this schedule by estimating the average or projected monthly expenses of the debtor and the filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.	e debtor's fa	mily at time case
☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Comple expenditures labeled "Spouse."	ete a separat	e schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	1,000.00
a. Are real estate taxes included? Yes No _X_		
b. Is property insurance included? Yes NoX		
2. Utilities: a. Electricity and heating fuel	\$	375.00
b. Water and sewer	\$	50.00
c. Telephone	\$	100.00
d. Other See Detailed Expense Attachment	\$	135.00
3. Home maintenance (repairs and upkeep)	\$	50.00
4. Food	\$	500.00
5. Clothing	\$	85.00
6. Laundry and dry cleaning	\$	80.00
7. Medical and dental expenses	\$	95.00
8. Transportation (not including car payments)	\$	300.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	100.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)	¢.	0.00
a. Homeowner's or renter's	\$	0.00 35.00
b. Life c. Health	\$ \$	0.00
d. Auto	\$ \$	386.00
e. Other	\$ 	0.00
12. Taxes (not deducted from wages or included in home mortgage payments)	Ψ	0.00
(Specify)	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the	Ψ	
plan)		
a. Auto	\$	512.00
b. Other reaffirmations	\$	137.90
c. Other See Attached Expense Sheet	\$	1,869.00
d. Other	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other See Detailed Expense Attachment	\$	190.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	5,999.90
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:		
20. STATEMENT OF MONTHLY NET INCOME		
a. Average monthly income from Line 15 of Schedule I	\$	5,769.06
b. Average monthly expenses from Line 18 above	\$	5,999.90
c. Monthly net income (a. minus b.)	\$	-230.84

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Official Fo	rm 6J (10/06)		Document	1 agc 30 01 37		
In re	Nellie May Johnson				Case No.	
·-			I	Debtor(s)	_	

# SCHEDULE J. CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) Detailed Expense Attachment

## **Other Utility Expenditures:**

internet	\$ 60.00
cable	\$ 75.00
Total Other Utility Expenditures	\$ 135.00

## **Other Expenditures:**

Personal Grooming	\$ 50.00
Drugstore incidentals	\$ 45.00
Auto Maintenance/repairs	\$ 35.00
Cigarettes	\$ 60.00
Total Other Expenditures	\$ 190.00

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T	Nellie May Johnson	Cose No	
In re	Neme way Johnson	Case No.	

Debtor(s)

## SCHEDULE J. CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) Attachment A

Jay Neace's Expenses:

Loan Payments: \$236

Medication: \$12

Car Payment: \$565

Total: \$813

**David Cahoe's Expenses:** 

Loan Payments: \$255

Clothing/Shoes: \$100

Cigarettes: \$60

Cellular Phone: \$80

Total: \$495

**Louise Hope Expenses:** 

Loan Payment: \$163

Cigarettes: \$300

Life Insurance payments: \$98

Total: \$561

**TOTAL EXPENSES: \$1869** 

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Official Form 6-Declaration. (10/06)

# **United States Bankruptcy Court Northern District of Illinois**

n re	Nellie May Johnson			Case No.	
			Debtor(s)	Chapter	7
	DECLARATION (	CONCERN	JING DERTOR'	S SCHEDIII	FS
	DECLARATION UNDER				
	2202		,		
	I declare under penalty of perjury  34 sheets [total shown on summary perknowledge, information, and belief.				
ate	June 25, 2007	Signature	/s/ Nellie May Johr	ıson	
ate		Signature	Nellie May Johnso		
			Debtor		

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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Official Form 7

## **United States Bankruptcy Court Northern District of Illinois**

In re	Nellie May Johnson		Case No.	
		Debtor(s)	Chapter	7

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. Do not include the name or address of a minor child in this statement. Indicate payments, transfers and the like to minor children by stating "a minor child." See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE \$38,871.00 2005 \$57,866.00 2006 \$33,967.00 2007

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts*. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL OF CREDITOR PAYMENTS AMOUNT PAID OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,475. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
NAME AND ADDRESS OF CREDITOR TRANSFERS TRANSFERS OWING

None

one c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND

AMOUNT STILL

RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT

AND CASE NUMBER

NATURE OF PROCEEDING

Midland funding v. debtor

COURT OR AGENCY

AND LOCATION

Circuit court of kane county

pending

06sck5830

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE
BENEFIT PROPERTY WAS SEIZED DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

SEIZED DATE OF SEIZON

## ${\bf 5.}\ \ Repossessions, for eclosures\ and\ returns$

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND LOCATION

NAME AND ADDRESS OF COURT DATE OF DESCRIPTION AND VALUE OF

OF CUSTODIAN CASE TITLE & NUMBER ORDER PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF RELATIONSHIP TO DESCRIPTION AND PERSON OR ORGANIZATION DEBTOR. IF ANY DATE OF GIFT VALUE OF GIFT

#### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

3

### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

DATE OF PAYMENT, AMOUNT OF MONEY

NAME AND ADDRESS
OF PAYEE
OF PAYEE
THAN DEBTOR
OF PROPERTY

Law Office of David Chang
10 N. Martingale Rd.

#400

#400 Schaumburg, IL 60173

Credit Info Net 2007 \$139 Dayton, OH

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#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

4

## 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None  $\Box$  List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER David Cahoe 44W300 Wheeler Road Sugar Grove, IL 60554 DESCRIPTION AND VALUE OF PROPERTY

Debtor is a custodian for her brother's Checking account with National City

LOCATION OF PROPERTY

Debtor receives her brother social security checks in this account

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#### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

5

#### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOC. SEC. NO./ COMPLETE EIN OR OTHER TAXPAYER I.D. NO.

ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

6

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

#### NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

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20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NATURE OF INTEREST NAME AND ADDRESS PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NATURE AND PERCENTAGE NAME AND ADDRESS TITLE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the

commencement of this case.

NAME **ADDRESS** DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year

immediately preceding the commencement of this case.

DATE OF TERMINATION NAME AND ADDRESS TITLE

23. Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation

in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS AMOUNT OF MONEY OF RECIPIENT, DATE AND PURPOSE OR DESCRIPTION AND RELATIONSHIP TO DEBTOR OF WITHDRAWAL VALUE OF PROPERTY

24. Tax Consolidation Group.

None If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated

group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

NAME OF PENSION FUND TAXPAYER IDENTIFICATION NUMBER (EIN)

#### 8

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	June 25, 2007	Signature	/s/ Nellie May Johnson
			Nellie May Johnson
			Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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Form 8 (10/05)

## **United States Bankruptcy Court** Northern District of Illinois

In re	Nellie May Johnson			Case No.		
		Debtor	r(s)	Chapter	7	
	CHAPTER 7 INDI	VIDUAL DEBTOR'S	STATEME	NT OF INT	ENTION	
	I have filed a schedule of assets and liability	ities which includes debts secu	red by property o	of the estate.		
	I have filed a schedule of executory contra	acts and unexpired leases which	n includes person	al property subj	ect to an unexpire	ed lease.
	I intend to do the following with respect to	property of the estate which s	ecures those deb	ts or is subject to	o a lease:	
Descr	iption of Secured Property	Creditor's Name	Property will be Surrendered	Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c)
Livir furni	ng Room set - lien held by aronson iture	Aronson Furniture Company				Х
2004 mile	Chevy s-10 with approximately 60k s	Consumer Portfolio Svc				Х
Descr Prope	iption of Leased rty	Lessor's Name	Lease will be assumed pursuar to 11 U.S.C. § 362(h)(1)(A)	ıt		
-NOI	NE-					
Date	June 25, 2007		ellie May John May Johnson			

Debtor

Case 07-11287 Doc 1 Filed 06/25/07 Entered 06/25/07 10:33:42 Desc Main Document Page 50 of 57 United States Bankruptcy Court Northern District of Illinois

In re	Nellie May Johnson		Case No.	
		Debtor(s)	Chapter	7
			-	

	DISCLOSURE OF COMPENSA	TION OF ATTORNEY I	FOR DEBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 20 compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of or	the petition in bankruptcy, or agree	d to be paid to me, for services rendered or	
	For legal services, I have agreed to accept	\$	1,055.00	
	Prior to the filing of this statement I have received	\$	631.00	
	Balance Due	\$	424.00	
2.	\$			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compensat	ion with any other person unless the	y are members and associates of my law firm	n.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names of			
6.	In return for the above-disclosed fee, I have agreed to render I a. Analysis of the debtor's financial situation, and rendering a b. Preparation and filing of any petition, schedules, statemen c. Representation of the debtor at the meeting of creditors and d. Representation of the debtor in adversary proceedings and e. [Other provisions as needed]  Negotiations with secured creditors to reduce reaffirmation agreements and applications a 522(f)(2)(A) for avoidance of liens on househouse.	advice to the debtor in determining of the fairs and plan which may be reduced confirmation hearing, and any adjuster contested bankruptcy matters to market value; exemption is needed; preparation and filir	whether to file a petition in bankruptcy; equired; ourned hearings thereof; ; planning; preparation and filing of	
7.	By agreement with the debtor(s), the above-disclosed fee does Representation of the debtors in any dischargany other adversary proceeding.	not include the following service: rgeability actions, judicial lien	avoidances, relief from stay actions o	r
	CF	ERTIFICATION		
this	I certify that the foregoing is a complete statement of any agre is bankruptcy proceeding.	ement or arrangement for payment (	to me for representation of the debtor(s) in	
Dat	ated: June 25, 2007	/s/ David Chang		
		David Chang 6273793	_	
		Law Office of David Chan 10 N. Martingale Rd.	9	
		#400		
		Schaumburg, IL 60173 847.466.1337 Fax: 847.46	66.1896	
<u> </u>			· · · · · · · ·	

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

### Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

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#### B 201 (04/09/06)

David Chang 6273793

#### Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### **Chapter 12:** Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

#### **Certificate of Attorney**

X /s/ David Chang

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Printed Name of Attorney	Signature of Attorney	Date				
Address:						
10 N. Martingale Rd.						
#400						
Schaumburg, IL 60173						
847.466.1337						
Certificate of Debtor I (We), the debtor(s), affirm that I (we) have received and read this notice.						
Nellie May Johnson	X /s/ Nellie May Johnson	June 25, 2007				
Printed Name(s) of Debtor(s)	Signature of Debtor	Date				
Case No. (if known)	X					
	Signature of Joint Debtor (if any)	Date				

June 25, 2007

## United States Bankruptcy Court Northern District of Illinois

Northern District of Illinois						
In re	Nellie May Johnson		Case No.			
		Debtor(s)	Chapter	7		
	VI	ERIFICATION OF CREDITOR M  Number o	MATRIX of Creditors:	43		
	The above-named Debtor(s (our) knowledge.	) hereby verifies that the list of cred	itors is true and	correct to the best of my		
Date:	June 25, 2007	/s/ Nellie May Johnson Nellie May Johnson Signature of Debtor				

Aarow Financial Services 5996 W Touhy Ave Niles, IL 60714

Anderson Fin Network Po Box 3097 Bloomington, IL 61702

Aronson Furniture Company c/o Monterey Financial Services Carlsbad, CA 92018

Associated Radiologists of Jol 39069 Treasury Center Chicago, IL 60694

Bakul K. Pandya 75 129th Infantry Dr Joliet, IL 60435

blatt, hasenmiller, lebsker & moore 125 s. Wacker Dr #400 Chicago, IL 60606-4440

Cb Accts Inc 1101 Main St Suite Peoria, IL 61606

Cbs Col Owbr Pob 1430 Owensboro, KY 42302

Cda/pontiac 415 E Main Pob 213 Streator, IL 61364

Check n' go 2116 W. Jefferson St Joliet, IL 60435-6622

Com Ed Bill Payment Center Chicago, IL 60668-0001 Community Orthopedics 1240 Essington Rd. #200 Joliet, IL 60435

Consultants in Diagnostic Imaging, P.O. Box 865
Dekalb, IL 60115

Consumer Portfolio Svc Po Box 57071 Irvine, CA 92619

Crd Prt Asso 13355 Noel Road# Dallas, TX 75240

Creditors Collection B 755 Almar Pkwy Bourbonnais, IL 60914

Credtrs Coll Pob 63 151 N Schuyler Ave Kankakee, IL 60901

Dependon Collection Se 7627 W Lake St 210 River Forest, IL 60305

Falls Collection Svc Po Box 668 Germantown, WI 53022

Fst Premier 900 W Delaware Po Box 5114 Sioux Falls, SD 57117

Great Lakes Specialty Finance, Inc 2116 W. Jefferson Street Joliet, IL 60435

Hari P. Gadde md 330 N. Madison, 111 Joliet, IL 60435 Heartland Cardivascular Center, LLC 210 N. hammes #205 Joliet, IL 60435-8139

Internal Revenue Service

Jay Neace Same as listed

Midland Cred 8875 Aero Dr Suite 200 San Diego, CA 92123

Mpcs 5055 Newburgh Plaza Sout Newburgh, IN 47630

Nco- Medclr Pob 41448 Philadelphia, PA 19101

Nuvell Financial 17500 Chenal Pkwy Ste 20 Little Rock, AR 72223

OMS P.O. Box 18060 Hauppauge, NY 11788-8860

Osi Collect 1375 E Woodfield #110 Schaumburg, IL 60173

Osi Collection Service 1375 E Woodfield Rd Ste Schaumburg, IL 60173

Oxford Collection Serv 135 Maxess Rd Ste 2a Melville, NY 11747 pellettieri and Associates 991 Oak creek drive Lombard, IL 60148-6408

Provena Health 2870 Stoner Court #300 North Liberty, IA 52317

Roadloans.com 7711 Center Ave Ste 100 Huntington Beach, CA 92647

RRCA 312 Locust Sterling, IL 61081

Silver Cross Hospital 1200 Maple Road Joliet, IL 60432

Taylor Auto Sales Inc 1008 Happy Valley Rd Glasgow, KY 42141

Usa Payday Loans 111 W Veterans Parkway Yorkville, IL 60560

Valley West Community Hospital P.O. Box 739 Moline, IL 61266-0739

Wells Fargo Po Box 29704 Phoenix, AZ 85038

Yatin Shah, MD 34609 Eagle Way Chicago, IL 60678-1346